

#5

Supplemental Application Data Sheet

Application Information

Application Type:: Regular
 Subject Matter:: Utility
 Suggested Classification::
 Suggested Group Art Unit::
 CD-ROM or CD-R?:: None
 Number of CD disks::
 Number of Copies of CDs::
 Sequence Submission?:: None
 Computer Readable Form (CRF):: No
 Number of copies of CRF:: 0
 Title:: INSPECTING SYSTEM FOR SECURITY
 SUPPORTS
 Attorney Docket Number:: 2512-1146
 Request for Early Publication?:: No
 Request for Non-Publication?:: No
 Suggested Drawing Figure::
 Total Drawing Sheets:: 7
 Small Entity?:: No
 Latin Name::
 Variety Denomination Name::
 Petition Included?:: No
 Petition Type::
 Licensed US Gov't Agency::
 Contract or Grant Numbers::
 Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIOVANNI
Middle Name::
Family Name:: DE TONI
Name Suffix::
City of Residence:: ~~SESTO SAN GIOVANNI~~ MILANO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing ~~VIALE G. MATTEOTTI, 191~~ VIALE G.
Address:: SUZZANI 18

City of Mailing Address:: ~~SESTO SAN GIOVANNI~~ MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: ~~I-20099~~ 20162

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: RENZO
Middle Name::
Family Name:: LISEI
Name Suffix::
City of Residence:: ~~PADERNO DUGNANO~~ MILANO
State or Province of
Residence::
Country of Residence::
Street of Mailing ~~VIA BOLIVIA, 36~~ VIA QUADRIFOGLIO 21/23
Address:: PADERNO DUGNANO

City of Mailing Address:: ~~PADERNO-DUGNANO~~ MILANO
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address:: I-20037

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: MAURIZIO
Middle Name::
Family Name:: RIPAMONTI
Name Suffix::
City of Residence:: SERGATE
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA FRATELLI CERVI
Address:: RES. TREFILI S.N.C.
City of Mailing Address:: SERGATE
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-20090

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ROBERTO
Middle Name::
Family Name:: SALGARI
Name Suffix::
City of Residence:: BASIGLIO
State or Province of
Residence::

Country of Residence:: ITALY
Street of Mailing VIA COLOMBO
Address:: RES. TIGLI, 212
City of Mailing Address:: BASIGLIO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-20080

Correspondence Information

Correspondence Customer
Number::

00466

Representative Information

Representative Customer
Number::

00466

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/IT2002/000594	9/17/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

